

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	10/10
FORMALITY REVIEW	132	503-883	10-25-01
RESPONSE FORMALITY REVIEW	AK	917	03 15-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	12	
2	✓	13	
3	✓	14	
4	✓	15	
5	✓	16	
6	✓	17	
7	✓	18	
8	✓	19	
9	✓	20	
10	✓	21	
11	✓	22	
12	✓	23	
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14	✓	25	
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34	✓	45	
35	✓	46	
36	✓	47	
37	✓	48	
38	✓	49	
39	✓	50	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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143
10/25/01
851
10/1/01